

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AS		11/19/99
O.I.P.E. CLASSIFIER		10	11/22
FORMALITY REVIEW	CM	71632	12/6/99
	CH	11632	5/15/00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/19/99
2	✓	✓	11/22
3	✓	✓	11/22
4	✓	✓	11/22
5	✓	✓	11/22
6	✓	✓	11/22
7	✓	✓	11/22
8	✓	✓	11/22
9	✓	✓	11/22
10	✓	✓	11/22
11	✓	✓	11/22
12	✓	✓	11/22
13	✓	✓	11/22
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48	✓	✓	11/22
49	✓	✓	11/22
50	✓	✓	11/22

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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